



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 9863

SERIAL NUMBER 10/675,229	FILING DATE 09/29/2003 RULE	CLASS 604	GROUP ART UNIT 3761	ATTORNEY DOCKET NO. B-5248 621294-8
-----------------------------	---------------------------------------	--------------	------------------------	---

APPLICANTS

Takako Fujii, Tokyo, JAPAN;
 Satoko Konawa, Tochigi, JAPAN;
 Masanori Kondo, Tochigi, JAPAN;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

JAPAN 2002-287231 09/30/2002 *verified 10/8*
 JAPAN 2003-97164 03/31/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 12/18/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after allowance <i>2/2/03</i> Examiner's Signature Initials	STATE OR COUNTRY JAPAN	SHEETS DRAWING 18	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 1
--	---	------------------------------	-------------------------	-----------------------	----------------------------

ADDRESS
 36716
 LADAS & PARRY
 5670 WILSHIRE BOULEVARD, SUITE 2100
 LOS ANGELES , CA
 90036-5679

TITLE
 Body fluid absorbing article

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
----------------------------	---	--

900		<table border="1"><tr><td data-bbox="1015 140 1461 210"><input type="checkbox"/> 1.18 Fees (Issue)</td></tr><tr><td data-bbox="1015 210 1461 262"><input type="checkbox"/> Other _____</td></tr><tr><td data-bbox="1015 262 1461 321"><input type="checkbox"/> Credit</td></tr></table>	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
<input type="checkbox"/> 1.18 Fees (Issue)					
<input type="checkbox"/> Other _____					
<input type="checkbox"/> Credit					
